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Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/646,084 TRANSMITTAL Applicati n Number **FORM** Filing Date August 22, 2003 (to be used for all correspondence after initial filing) **First Named Inventor** Bardy, Gust H. Group Art Unit Unassigned **Examiner Name** Unassigned Total Number of Pages in This Submission Attorney Docket Number 020.0343.US.CON ENCLOSURES (check all that apply) **Assignment Papers** After Allowance Communication Fee Transmittal Form (for an Application) to Group Appeal Communication to Board of Fee Attached Drawing(s) Appeals and Interferences Appeal Communication to Group Amendment / Reply Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Status Letter Provisional Application Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please Extension of Time Request identify below): Address **Express Abandonment Request** 1 Published Reference Terminal Disclaimer Postcard Information Disclosure Statement Request for Refund and Transmittal Letter Certified Copy of Priority CD, Number of CD(s) Document(s) Response to Missing Parts/ Remarks Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Law Offices of Patrick J.S. Inouve Individual name Signature September 22, 2003 Date **CERTIFICATE OF MAILING** I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop IDS, PO Box 1450, Alexandria, September 22, 2003 VA 22313-1450 on this date: Type or printed name Larissa V. Pigott

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Date

September 22, 2003

Applicant(s): Bardy	
Serial No.: 10/646,084 Filed: August 22, 2003	Group Art Unit: Unassigned
Title: System And Method For Providing Feedback To An Individual Patient For Automated Remote Patient Care	Examiner: Unassigned

Attorney Docket No.: 020.0343.US.CON

Commissioner for Patents Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted:

<u>X</u>	under 37 CFR 1.97(b), or (Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)
	under 37 CFR 1.97(c) together with either a: Statement under 37 CFR 1.97(e), or a \$180.00 fee under 37 CFR 1.17(p), or (After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)
	under 37 CFR 1.97(d) together with a: Statement under 37 CFR 1.97(e), and a \$180.00 fee set forth in 37 CFR 1.17(p). (Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

X Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

Respectfully submitted,

Patrick J.S. Inouye,

Attorney/Agent for Applicant(s)

Reg. No. 40297

Date: September 22, 2003

Telephone No.: (206) 381-3900

SEP 2 6 2003

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STATEMENT BY APPLICANT (use as many sheets as necessary)		First Named Inventor	Bardy		
		Art Unit	Unassigned		
				Examiner Name	Unassigned
Sheet	1	of	1	Attorney Docket Number	020.0343.US.CON

	U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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